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**REQUEST FOR WITHDRAWAL
AS ATTORNEY OR AGENT
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| | |
|------------------------|-------------------|
| Application Number | 10/516374 |
| Filing Date | November 30, 2004 |
| First Named Inventor | Kahn, Jonathan |
| Art Unit | 2837 |
| Examiner Name | Fletcher, M. T. |
| Attorney Docket Number | 09761730-0034 |

**To: Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450**

Please withdraw me as attorney or agent for the above identified patent application, and

☐ all the attorneys/agents of record.☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or☒ the attorneys/agents associated with Customer Number 26263

NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.

The reasons for this request are:

Client has instructed that responsibility for these matters now lies with another law firm.

CORRESPONDENCE ADDRESS

1. ☐ The correspondence address is NOT affected by this withdrawal.2. ☐ Change the correspondence address and direct all future correspondence to:☐ The address associated with Customer Number:

OR

☒ **Firm or Individual Name** Jordan A. Sigale - Loeb & Loeb LLP**Address** 321 North Clark
Suite 2300**City** Chicago **State** IL **Zip** 60610**Country** US**Telephone** 312 454 3100**Email****Signature****Name** David R. Metzger**Registration No.** 32919**Date** March 21, 2007**Telephone No.** 312 876 8000

NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

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